Case 1:04-cr-10066-MEL Document 85 U.S. Department of Justice **United States Marshals Service**

PLAINTIFF UNITED STATES OF AMERICA							COURT CASE NUMBER CR No. 04-10066-MEL			
DEFENDANT JAMIE EDELKIND							TYPE OF PROCESS Preliminary Order of Forfeiture			
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN									
♦ AT	Hull Board of Assessors, Attn: David Beck						DIS:	=	င့်ဒ	
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)									
Town Hall, 235 Atlantic Avenue, Hull, Massachusetts 02045										
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:							n - 285	,	-6:	
Kristina E. Barclay, Assistant U.S. Attorney United States Attorney's Office John Joseph Moakley United States Courthouse							Number of parties to the served in this case			
							Check for service on U.S.A.			
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)										
Please serve the attached Preliminary Order of Forfeiture upon the above named individual by certified mail,										
return receipt requested. 05-FBT-003060 LJT x3283										
VACAN E RANGE UT							TELEPHONE NUMBER DATE		30 2005	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE										
I acknowledge receipt for the total Total Process District of Origin District to Serve Signature of Authorized USMS Deputy or Clerk Date										
number of process i (Sign only first USA one USM 285 is sub	1 285 if more than	No	No. <u>38</u>	No. 38	Mas	W/ Men		_ 7	7/13/15-	
I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.										
I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).										
Name and title of individual served (If not shown above).						A	A person of suitable age and discretion then			
Address (complete only if different than shown above)							rvice,	Time	am pm	
						Signature of	Signature of U.S. Marshal or Deputy			
Service Fee	Total Mileage Ch (including endeav		ing Fee To	otal Charges	Advance Deposits	Amount Ov	wed to US Marshal or	Amou	unt or Refund	
7/18/05 ctfd mail: 7004 1160 0001 56578401 7/18/05 Date & Delivery										
PRIOR EDITIONS MAY BE USED 1. CLERK OF THE COURT FORM USM 285 (Rev. 12/15/80)										